



UTILITY PATENT APPLICATION TRANSMITTAL

Our Docket No.: 33430/US

First Named Inventor: Robert H. Stock

Title: PACKAGED LIVESTOCK INGESTIBLE

Express Mail No.: EV 325427521 US

ADDRESS TO:**Mail Stop PATENT APPLICATION**

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

APPLICATION ELEMENTS**ACCOMPANYING APPLICATION PARTS**

- | | |
|--|--|
| 1. <input checked="" type="checkbox"/> Fee Calculation Sheet
(Submit an original and a duplicate for fee processing) | 9. <input type="checkbox"/> Certification Under 35 U.S.C. 122(b)(2)(B)(i) |
| 2. <input type="checkbox"/> Applicant claims small entity status | 10. <input type="checkbox"/> Assignment Papers (cover sheet & document(s)) |
| 3. <input checked="" type="checkbox"/> Specification with Cover Sheet Total Pages: 38 | 11. <input type="checkbox"/> 37 C.F.R. 3.73(b) Submission |
| <input checked="" type="checkbox"/> Descriptive title of the invention
<input type="checkbox"/> Cross Reference to Related Applications

<input type="checkbox"/> Statement Re: Fed. Sponsored R&D
<input type="checkbox"/> Reference to Microfiche Appendix

<input checked="" type="checkbox"/> Background of the Invention
<input checked="" type="checkbox"/> Brief Summary of the Invention

<input checked="" type="checkbox"/> Brief Description of the Drawings
<input checked="" type="checkbox"/> Detailed Description
<input checked="" type="checkbox"/> Claims
<input checked="" type="checkbox"/> Abstract of the Disclosure | 12. <input type="checkbox"/> Power of Attorney
13. <input checked="" type="checkbox"/> Information Disclosure Statement
(with Copies of Citations as necessary)
14. <input type="checkbox"/> Preliminary Amendment Total Pages:
15. <input type="checkbox"/> Certified Copy of Priority document(s)
(if foreign priority is claimed)
16. <input type="checkbox"/> English Translation Document (if applicable)
17. <input checked="" type="checkbox"/> Return Receipt Postcard
(Should be specifically itemized)
18. <input checked="" type="checkbox"/> Other
<input checked="" type="checkbox"/> Check No. 964261 for \$1,122.00
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/> |
| 4. <input checked="" type="checkbox"/> Drawings (35 U.S.C. 113) Total Sheets: 4 | |
| 5. <input type="checkbox"/> Oath or Declaration Total Pages:
a. <input type="checkbox"/> Newly Executed (original or copy)
b. <input type="checkbox"/> Copy from a prior application (37 C.F.R. 1.63(d))
(for continuation/divisional with
Box 19 completed) | |
| i. <input type="checkbox"/> <u>DELETION OF INVENTORS</u>
Signed statement attached deleting inventor(s)
named in the prior application (37 C.F.R.
1.63(d)(2) and 1.33(b)) | |
| 6. <input checked="" type="checkbox"/> Application Data Sheet (37.C.F.R. 1.76) | |
| 7. <input type="checkbox"/> CD-ROM or CD-R in duplicate,
large table or Computer Program (Appendix) | |
| 8. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission
(If applicable, all necessary) | |
| a. <input type="checkbox"/> Computer Readable Form (CRF) | <input type="checkbox"/> Continuation |
| b. <input type="checkbox"/> Specification Sequence Listing on:
i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or
ii. <input type="checkbox"/> paper | <input type="checkbox"/> Division |
| c. <input type="checkbox"/> Statement verifying identify of above copies | <input type="checkbox"/> Continuation-in-Part (CIP) |

CONTINUATION APPLICATIONS

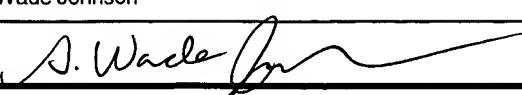
19. If a CONTINUATING APPLICATION, check appropriate box and supply the requisite information:

- Continuation
 Division
 Continuation-in-Part (CIP)

of PRIOR APPLICATIONNo. _____, filed _____
and also claims priority from
_____, dated _____.

For CONTINUATION or DIVISIONAL APPLICATIONS: The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 5b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference.

CORRESPONDENCE ADDRESS

ADDRESS	CUSTOMER NUMBER		
	25763	DORSEY & WHITNEY LLP Intellectual Property Department Suite 1500 50 South Sixth Street Minneapolis, MN 55402-1498	
TELEPHONE	612-340-8835		FAX: 612-340-8856
Attorney Name:: S. Wade Johnson			Reg. No. 50,873
Signature:			Date: 8-22-03

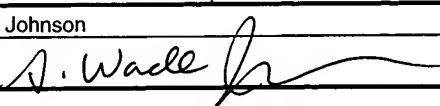
16086 U.S. PTO
08/22/03

APPLICATION FEE TRANSMITTAL SHEET (FY 2003)

<i>Complete if Known</i>	
Application No.	Not Yet Known
Filing Date	Herewith
First Named Inventor	Robert H. Stock
Group Art Unit	Not Yet Known
Examiner Name	Not Yet Known
Atty. Docket Number	33430/US

METHOD OF PAYMENT (Check One)			FEE CALCULATION (Continued)				
1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any over payments to: Deposit Account No.: <u>04-1420</u> Deposit Account Name: <u>DORSEY & WHITNEY LLP</u>			3. ADDITIONAL FEES				
<input checked="" type="checkbox"/> Charge any additional fee required under 37 C.F.R. 1.16 and 1.17 <input type="checkbox"/> Applicant claims small entity status (see 37 C.F.R. 1.27)			Large Entity Fee 50 25 Surcharge - late provisional filing fee or cover sheet 130 65 Surcharge – Late nonprovisional filing fee or oath 180 180 Submission of IDS 40 40 Recording each patent assignment per property (times number of properties)	Small Entity Fee 110 55 Extension for reply within first month 410 205 Extension for reply within second month 930 465 Extension for reply within third month 1,450 725 Extension for reply within fourth month 1,970 985 Extension for reply within fifth month 750 375 Submission After Final 1.129 320 160 Notice of Appeal 320 160 Filing a brief in support of an appeal 280 140 Request for oral hearing 110 55 Terminal Disclaimer Fee 130 130 Petitions to the Commissioner 50 50 Petitions related to provisional applications	Fee Description Fee paid		
FEE CALCULATION							
1. BASIC FILING FEE							
Large Entity Fee	Small Entity Fee	<u>Fee Description</u>					
160	80	<input type="checkbox"/> Provisional Filing Fee					
750	375	<input checked="" type="checkbox"/> Utility Filing Fee					
330	165	<input type="checkbox"/> Design Filing Fee					
750	375	<input type="checkbox"/> Reissue Filing Fee					
Subtotal (1)			\$750.00				
2. EXTRA* CLAIM FEES							
Number Claims	Prior	Extra	<u>Fee from Below*</u>	<u>Fee Paid</u>			
Total	36	- 20	= 16	x \$18.00	= \$288.00		
Indep.	4	- 3	= 1	x \$84.00	= \$84.00		
Multiple Dependent Claims			=	x	=		
Subtotal (2)			\$372.00				
*Calculation of Extra Claim Fees							
Large Entity Fee	Small Entity Fee	<u>Fee Description</u>					
18	9	Claims in excess of 20					
84	42	Independent claims in excess of 3					
280	140	Multiple dependent Claim					
84	42	Reissue independent claims over original patent					
18	9	Reissue claims in excess of 20 and over original patent					
OTHER FEE (specify)							
Subtotal (3)						0	
						Total Amount of Payment:	\$1,122.00

Submitted by:

CUSTOMER NUMBER 25763	DORSEY & WHITNEY LLP	Intellectual Property Department Suite 1500, 50 South Sixth Street Minneapolis, MN 55402	
Name: S. Wade Johnson		Phone No.: (612) 340-8835	Fax No.: (612) 340-8856
Signature: 		Reg. No.: 50,873	Date: 8-22-03

CERTIFICATE OF MAILING BY "EXPRESS MAIL" (37 CFR 1.10)

Applicant(s): Robert H. Stock

Docket No.

33430/US

Serial No.

Not Yet Known

Filing Date

Herewith

Examiner

Not Yet Known

Group Art Unit

Not Yet Known

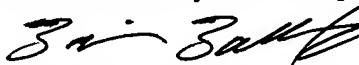
Invention: **PACKAGED LIVESTOCK INGESTIBLE**

I hereby certify that the following correspondence:

Appln Transmtl (1); Fee Transmtl (1); Appln Data Sheet (1); Spec w/Cover Sheet (38); Drwgs, FIGS. 1, 1a, 2-9 (4);
Information Disclosure Statement Under 37 CFR 1.97(b) (2); Form PTO/SB/08A (1, in dupl); Copy of One Ref Cited;
Check #964261; Rept Pstcd

(Identify type of correspondence)

is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on

22 August 2003*(Date)*Brian Ballard*(Typed or Printed Name of Person Mailing Correspondence)**(Signature of Person Mailing Correspondence)*EV 325427521 US*("Express Mail" Mailing Label Number)*

Note: Each paper must have its own certificate of mailing.